

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	JH		2/23/00
O.I.P.E. CLASSIFIER			3/8/00
FORMALITY REVIEW			1/19
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	1	✓	A 11/19/2000
2	2	✓	A 11/19/2000
3	3	✓	A 11/19/2000
4	4	✓	A 11/19/2000
5	5	✓	A 11/19/2000
6	6	✓	A 11/19/2000
7	7	✓	A 11/19/2000
8	8	✓	A 11/19/2000
9	9	✓	A 11/19/2000
10	10	✓	A 11/19/2000
11	11	✓	A 11/19/2000
12	12	✓	A 11/19/2000
13	13	✓	A 11/19/2000
14	14	✓	A 11/19/2000
15	15	✓	A 11/19/2000
16	16	✓	A 11/19/2000
17	17	✓	A 11/19/2000
18	18	✓	A 11/19/2000
19	19	✓	A 11/19/2000
20	20	✓	A 11/19/2000
21	21	✓	A 11/19/2000
22	22	✓	A 11/19/2000
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If more than 150 claims or 10 actions  
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